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# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA

### CHAPTER 13 PLAN AND RELATED MOTIONS

Name of Debtor(s):	Robert Leonard Hairston, II Alethea Renee Hairston	Case No:
This plan, dated No	vember 3, 2014, is:	
	the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces theconfirmed orunconfirmed Plan dated .	
	Date and Time of Modified Plan Confirming Hearing:	
	Place of Modified Plan Confirmation Hearing:	
The F	Plan provisions modified by this filing are:	
Credi	tors affected by this modification are:	

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$134,815.64

Total Non-Priority Unsecured Debt: \$94,421.00

Total Priority Debt: **\$0.00**Total Secured Debt: **\$101,814.00** 

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- 1. Funding of Plan. The debtor(s) propose to pay the trustee the sum of \$450.00 Monthly for 60 months via WDO in the amount of \$207.69 every two weeks beginning in Nov. 2014. Other payments to the Trustee are as follows: NONE .

  The total amount to be paid into the plan is \$ 27,000.00 .
- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
  - A. Administrative Claims under 11 U.S.C. § 1326.
    - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
    - 2. Debtor(s)' attorney will be paid \$\( \begin{align\*} \) **2,700.00** balance due of the total fee of \$\( \begin{align\*} \) **3,300.00** concurrently with or prior to the payments to remaining creditors. Includes filing fees, credit reports and credit counseling/debtor education and the costs of mailing and copying through confirmation. Per the fee agreement, is for representation to confirmation. Per fee agreement, counsel charges \$50 per creditor amendment to be paid directly by debtors if such amendment necessary.
  - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

Creditor	Type of Priority	Estimated Claim	Payment and Term
-NONE-			

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
  - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

Creditor	Collateral	Purchase Date	Est Debt Bal.	Replacement Value
Martinsville City	4BR/2.5BA Vinyl-Sided Home located at	12/13-6/14	1,326.00	20,848.00
Treasurer	721 Indian Trail, Martinsville, VA 24112			

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#### B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

CreditorCollateral DescriptionEstimated ValueEstimated Total ClaimTeressia C. Hairston2000 Pontiac Sunfire (not tagged or insured)218.00Estimated Total Claim

#### C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

Creditor Collateral Description Adeq. Protection Monthly Payment To Be Paid By

Express Check Advance VA, LLC 2004 GMC Envoy XL 4x4 90.21 Trustee 195,000 miles NADA clean trade -in value

Schewel Furniture Company Refrigerator, Stove 90.90 Trustee

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

### D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, **whichever is less**, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. **Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.** 

Creditor Express Check Advance VA, LLC	Collateral 2004 GMC Envoy XL 4x4 195,000 miles NADA clean trade -in value	Approx. Bal. of Debt or "Crammed Down" Value 3,010.00	Rate 5%	Monthly Paymt & Est. Term**  90.21 36 months Trustee is authorized to accelerate payment to secured creditors after payment of legal fees.
Martinsville City Treasurer	4BR/2.5BA Vinyl-Sided Home located at 721 Indian Trail, Martinsville, VA 24112	1,326.00	8%	41.55 36 months Trustee is authorized to accelerate payment to secured creditors after payment of legal fees.

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#### E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

#### 4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately 11 %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately 5 %.
- B. Separately classified unsecured claims.

Creditor	Basis for Classification	Treatment
-NONE-		

- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
  - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

		Regular		Arrearage		Monthly
		Contract	Estimated	Interest	Estimated	Arrearage
Creditor	Collateral	Payment	Arrearage	Rate	Cure Period	Payment
Martinsville DuPont	4BR/2.5BA Vinyl-Sided Home	616.00	3,000.00	0%	18 months	Prorata
Credit Union	located at 721 Indian Trail,					
	Martinsville, VA 24112	Payments to				
		resume Dec. 1,				
		2014				

**B.** Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

		Regular			Monthly
		Contract	Estimated Interest	Term for	Arrearage
Creditor	Collateral	Payment	Arrearage Rate	Arrearage	Payment
NONE					

C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

Datimated

		merest	Estimated	
Creditor	Collateral	Rate	Claim	Monthly Paymt& Est. Term**
-NONE-		<del></del>		

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- **6. Unexpired Leases and Executory Contracts.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
  - **A. Executory contracts and unexpired leases to be rejected.** The debtor(s) reject the following executory contracts.

Creditor -NONE-

Type of Contract

**B.** Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

Monthly
Payment Estimated
Creditor
-NONE
Monthly
Payment Estimated
for Arrears
Cure Period

- 7. Liens Which Debtor(s) Seek to Avoid.
  - A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor Collateral Exemption Amount Value of Collateral

**B.** Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

<u>Creditor</u> <u>Type of Lien</u> <u>Description of Collateral</u> <u>Basis for Avoidance</u>

- 8. Treatment and Payment of Claims.
  - All creditors must timely file a proof of claim to receive payment from the Trustee.
  - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
  - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
  - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- **Vesting of Property of the Estate.** Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- **10. Incurrence of indebtedness.** The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:

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#### A. ATTORNEYS FEES

Attorneys Fees noted in Paragraph 2A shall be approved on the confirmation date unless previously objected to. Said allowed fees shall be paid by the trustee contemporaneously with scheduled debts under Paragraph 3, unless expressly noted to be paid differently. A flat fee of \$50 is charged for creditor amendments to cover filing fee, mailing and cost of preparation and shall be paid directly to counsel.

#### B. AUTO DRAFT OF ANY DIRECT PAYMENTS BY DEBTOR AND POST-PETITION STATEMENTS

Any bank or financial institution or lender to which the debtor has previously consented to auto draft payments from his or her bank account, is expressly authorized to keep such auto-draft in place and to deduct post-petition payments from the debtor's bank account. Such a deduction will not be viewed as a violation of the automatic stay.

The automatic stay is modified to permit the noteholder or servicing agent on any secured debts being paid by the debtors to send the debtor payment coupons, payment statements or invoices, notices of late payment, notices of payment changes, notices of servicing transfers, or any other notice, other than a notice of acceleration or demand for payment of the entire balance, normally sent to customers in the ordinary course of business.

Signatures:			
Dated: Nov	ember 3, 2014		
	nard Hairston, II		/s/ Malissa Giles; Tracy Giles; Kimberly Bandy
Robert Leonar Debtor	d Hairston, II		Malissa Giles; Tracy Giles; Kimberly Bandy Debtor's Attorney
/s/ Alethea Renee Alethea Renee Joint Debtor			,
Exhibits:	Copy of Debtor(s)' Bud Matrix of Parties Serv	dget (Schedules I and J); ed with Plan	
I certify that on Service List.	November 3, 2014 , 1	Certificate of Service I mailed a copy of the foregoing to t	e the creditors and parties in interest on the attached
		/s/ Malissa Giles; Tracy Giles;	
		Malissa Giles; Tracy Giles; Ki Signature	mberly Bandy
		129 E. Campbell Ave., Suite 3 PO Box 2780 Roanoke, VA 24001	00
		Address	
		540-981-9000	
		Telephone No.	

Ver. 09/17/09 [effective 12/01/09]

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Fill in this information t	to identify your case:	
Debtor 1	Robert Leonard Hairston, II	
Debtor 2 (Spouse, if filing)	Alethea Renee Hairston	
United States Bankrup	otcy Court for the: WESTERN DISTRICT OF VIRGINIA	
Case number (If known)		Check if this is:  ☐ An amended filing ☐ A supplement showing post-petition chapter
Official Form		13 income as of the following date:  MM / DD/ YYYY

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	Correctional Officer	Teacher's Aide
Include part-time, seasonal, or self-employed work.	Employer's name	Green Rock Correctional Center	Pittsylvania. Co. Community Action
Occupation may include student or homemaker, if it applies.	Employer's address	475 Green Rock Lane Chatham, VA 24531	P.O. Box 1119 Chatham, VA 24531
	How long employed the	here? 2011 to present	Aug. 18, 2014 to

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 2,634.08 \$ 1,203.89

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form B 61 Schedule I: Your Income page 1

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Debtor 1 Robert Leonard Hairston, II

Debt	or 2	Alethea Renee Hairston		Case r	number (if known)			
				For	Debtor 1		ebtor 2 or ling spouse	
	Cop	y line 4 here	4.	\$	2,634.08	\$	1,203.89	•
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	337.60	\$	149.15	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	•
	5c.	Voluntary contributions for retirement plans	5c.	\$	131.70	\$	0.00	•
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	318.36	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	•
	5h.	Other deductions. Specify: Deferred Comp	_ 5h.+	\$	40.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ <u> </u>	827.66	\$	149.15	•
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,806.42	\$	1,054.74	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$ <u> </u>	0.00	\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	•
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: 1/12th Income Tax Refund	8h.+	\$		+ \$	388.50	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	217.83	\$	388.50	
10	Cal	aulate menthly income. Add line 7 L line 0	10. \$		2,024.25 + \$	1,44	3.24 = \$	3,467.49
10.		culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ю. ф		z,024.25 + φ_	1,44	3.24   J	3,407.49
11.	Stat Inclu othe Do i	the all other regular contributions to the expenses that you list in Schedule cade contributions from an unmarried partner, members of your household, your per friends or relatives.  In the contributions from an unmarried partner, members of your household, your per friends or relatives.  In the contribution of the contribut	depen		•		hedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$	3,467.49
13.	Do	you expect an increase or decrease within the year after you file this form	?				Combir monthly	ed y income
		No.						

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Fill	in this information to identify your case:					
Deb	Debtor 1 Robert Leonard Hairston, II		Check if this is:			
Deb	otor 2 Alethea Renee Hairston				wing post-petition chapter	
(Sp	ouse, if filing)			13 expenses as of	the following date:	
United States Bankruptcy Court for the: WESTERN DISTRICT OF VIRGINIA			MM / DD / YYYY			
Case number						
(If K	nown)			2 maintains a separate household		
0	fficial Form B 6J					
S	chedule J: Your Expenses				12/1:	
info	as complete and accurate as possible. If two married people an ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.					
	t 1: Describe Your Household					
1.	Is this a joint case?  ☐ No. Go to line 2.					
	Yes. Does Debtor 2 live in a separate household?					
	■ No □ Yes. Debtor 2 must file a separate Schedule J.					
2.	Do you have dependents? ☐ No					
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?	
	Do not state the	0		40	□ No	
	dependents' names.	Son			■ Yes □ No	
		Daughter		21	■ Yes	
					□ No	
					☐ Yes ☐ No	
					☐ Yes	
3.	Do your expenses include expenses of people other than yourself and your dependents?   ■ No  Yes					
Pai	t 2: Estimate Your Ongoing Monthly Expenses					
Est	timate your expenses as of your bankruptcy filing date unless y benses as of a date after the bankruptcy is filed. If this is a supp policable date.					
	lude expenses paid for with non-cash government assistance i					
	evalue of such assistance and have included it on <i>Schedule I:</i> Y ficial Form 6I.)	our Income		Your exp	enses	
4.	The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.		je 4.	\$	616.00	
	If not included in line 4:					
	4a. Real estate taxes		4a.	\$	0.00	
	4b. Property, homeowner's, or renter's insurance		4b.	:	52.50	
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	0.00	
5.	<ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as ho</li> </ul>	me equity loans	4d. 5.	·	0.00	
٥.	Additional mortgage payments for your residence, Such as no	me equity 10al 15	ວ.	Ψ	0.00	

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ebtor 1 Rol	bert Leonard Hairston, II			
ebtor 2 Ale	thea Renee Hairston	Case num	ber (if known)	
Utilities:			_	
Utilities:	stricity, boot notified acc	60	¢.	075.00
	ctricity, heat, natural gas	6a. 6b.	\$ \$	275.00
	er, sewer, garbage collection		\$	16.00
	ephone, cell phone, Internet, satellite, and cable services	6c.	· -	264.00
	er. Specify:	6d.	·	0.00
	housekeeping supplies	7.	\$	600.00
	and children's education costs	8.	\$	25.00
•	laundry, and dry cleaning	9.	\$	50.00
Personal	care products and services	10.	\$	100.00
Medical a	nd dental expenses	11.	\$	100.00
Transport	ation. Include gas, maintenance, bus or train fare.	40	Φ.	450.00
	lude car payments.	12.	·	450.00
	ment, clubs, recreation, newspapers, magazines, and books	13.	· -	0.00
Charitable	e contributions and religious donations	14.	\$	0.00
Insurance				
	lude insurance deducted from your pay or included in lines 4 or 20.		•	
15a. Life		15a.	·	0.00
	Ith insurance	15b.	·	0.00
15c. Veh	icle insurance	15c.	· -	200.00
15d. Othe	er insurance. Specify:	15d.	\$	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	Real Estate Taxes	16.	\$	114.00
	nt or lease payments:			
17a. Car	payments for Vehicle 1	17a.	\$	0.00
17b. Car	payments for Vehicle 2	17b.	\$	0.00
17c. Othe	er. Specify:	17c.	\$	0.00
17d. Othe	er. Specify:	17d.	\$	0.00
Your payr	ments of alimony, maintenance, and support that you did not report		· ·	
deducted	from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00
Other pay	ments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	I property expenses not included in lines 4 or 5 of this form or on So	chedule I: Y	our Income.	
20a. Mor	tgages on other property	20a.	\$	0.00
20b. Rea	l estate taxes	20b.	\$	0.00
20c. Prop	perty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maii	ntenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Hon	neowner's association or condominium dues	20e.	\$	0.00
Other: Sp	ecify: Education necessary to maintain employment	21.	+\$	145.00
	thly expenses. Add lines 4 through 21.	22.	\$	3,007.50
	is your monthly expenses.		-	
	your monthly net income.	20	Φ.	
	y line 12 (your combined monthly income) from Schedule I.	23a.		3,467.49
23b. Cop	y your monthly expenses from line 22 above.	23b.	-\$	3,007.50
23c. Sub	tract your monthly expenses from your monthly income.			
	result is your monthly net income.	23c.	\$	459.99
For example	expect an increase or decrease in your expenses within the year after e, do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?			r decrease because of a
☐ Yes. Explain:				

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Hairston, II, Robert and Alethea -

AES STUDENT LOAN
RE: PHEAA SERVICING CENTER
PO BOX 2461
HARRISBURG, PA 17105

AMCA 2269 S SAW MILL ELMSFORD, NY 10523

APOGEE MEDICAL GROUP PO BOX 708910 SANDY, UT 84070-8910

ARS ACCOUNT RESOLUTION 1801 NW 66TH AVE STE 200 PLANTATION, FL 33313

ASTHMA AND ALLERGY CENTER 1505 FRANKLIN ROAD SW ROANOKE, VA 24016-5206

BANK OF AMERICA C/O LTD FINANCIAL SERVICES 7322 SOUTHWEST FREEWAY, SUITE 1600 HOUSTON, TX 77074

BARCLAY TOWERS TIME SHARE C/O M. RICHARD EPPS, ESQ. 605 LYNNHAVEN PARKWAY, SUITE 200 VIRGINIA BEACH, VA 23452

CAPIO PARTNERS LLC 2222 TEXOMA PARKWAY SUITE 160 SHERMAN, TX 75090

CAPITAL ONE BANK ATTN: BANKRUPTCY DEPT. PO BOX 30285 SALT LAKE CITY, UT 84130

CENTURY LINK
PO BOX 1319
CHARLOTTE, NC 28201-1319

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Hairston, II, Robert and Alethea -

CREDIT COLL PO BOX 9136 NEEDHAM, MA 02494

CREDIT COLLECTIONS SVC PO BOX 773 NEEDHAM, MA 02494

CREDIT ONE BANK PO BOX 98873 LAS VEGAS, NV 89193

DEPT OF EDUCATION/NELN 121 S 13TH STREET LINCOLN, NE 68508

EMERGENCY COVERAGE CORP. PO BOX 740023 CINCINNATI, OH 45274-0023

EXPRESS CHECK ADVANCE VA, LLC 2618 VIRGINIA AVENUE COLLINSVILLE, VA 24078

FATADE HEALTH & MEDICAL CENTER 1 EAST MARKET STREET MARTINSVILLE, VA 24112

GEMB/WALMART ATTN: BANKRUPTCY PO BOX 103104 ROSWELL, GA 30076

GM FINANCIAL PO BOX 181145 ARLINGTON, TX 76096

GREENSBORO RADIOLOGY C/O SCA COLLECTIONS INC PO BOX 876 GREENVILLE, NC 27835

GREENSBORO RADIOLOGY PO BOX 63054 CHARLOTTE, NC 28263-3054

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Hairston, II, Robert and Alethea -

IC SYSTEM ATTN: BANKRUPTCY 444 HIGHWAY 96 EAST; PO BOX 64378 ST. PAUL, MN 55164

JNR ADJUSTMENT COMPANY PO BOX 27070 MINNEAPOLIS, MN 55427

LAB CORP PO BOX 2240 BURLINGTON, NC 27216

MARTINSVILLE CITY PO BOX 1112 MARTINSVILLE, VA 24112

MARTINSVILLE CITY TREASURER P.O. BOX 1023
MARTINSVILLE, VA 24114-1023

MARTINSVILLE DUPONT CREDIT UNION PO BOX 2158
MARTINSVILLE, VA 24113

MARTINSVILLE ENT PO BOX 4788 MARTINSVILLE, VA 24112

MARTINSVILLE OTOLARYNGOLOGY 445 E. COMMONWEALTH BLVD. MARTINSVILLE, VA 24112

MEMORIAL HOSPITAL OF MARTINSVILLE PO BOX 4788 MARTINSVILLE, VA 24115

MEMORIAL HOSPITAL OF MARTINSVILLE C/O NPAS SOLUTIONS, INC. PO BOX 2248
MARYLAND HEIGHTS, MO 63043-1048

MOSES CONE MEMORIAL HOSPITAL PO BOX 742879 ATLANTA, GA 30374-2879

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Hairston, II, Robert and Alethea -

MRC RECEIVABLES CORP.
C/O DOMINION LAW ASSOCIATES
222 CENTRAL PARK AVE., SUITE 210
VIRGINIA BEACH, VA 23462

NATIONAL AUTO FINANCE 200 RENAISSANCE CTR DETROIT, MI 48243

NATIONAL GENERAL INSURANCE C/O FIRST POINT COLLECTION RESOURCE PO BOX 26140 GREENSBORO, NC 27402-6140

PIED CREDIT & COLLECTION PO BOX 1596 DANVILLE, VA 24543

PIEDMONT EAR NOSE & THROAT 110 CHARLOIS BLVD WINSTON SALEM, NC 27103-1522

PMAB SRVC 5970 FAIRVIEW RD CHARLOTTE, NC 28210

ROBIN P. FERGUSON 737 CORN TASSEL TRAIL MARTINSVILLE, VA 24112

SALLIE MAE ATTN: CLAIMS DEPARTMENT PO BOX 9500 WILKES-BARRE, PA 18773

SCHEWEL FURNITURE COMPANY 101 PINEY FOREST ROAD DANVILLE, VA 24543

SPRINT C/O WEST ASSET MANAGEMENT 2703 N HIGHWAY 75 SHERMAN, TX 75090

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Hairston, II, Robert and Alethea -

SPRINT C/O AFNI, INC. PO BOX 3517 BLOOMINGTON, IL 61702-3517

TERESSIA C. HAIRSTON 114 PARADISE HILLS MARTINSVILLE, VA 24112

UNITED CONSUMER FINANCIAL SERVICES 865 BASSETT RD WESTLAKE, OH 44145

UNIVERSITY OF PHOENIX 4025 S RIVERPOINT PARKWAY PHOENIX, AZ 85040

VANGUARD FINANCIAL SER 210 BROOKS ST SUIT CHARLESTON, WV 25301

VANGUARD FINANCIAL SERVICES INC PO BOX 633885 CINCINNATI, OH 45263-3885

VERIZON
500 TECHNOLOGY DR
STE 550
WELDON SPRING, MO 63304

WAKE FOREST UNIVERSITY HEALTH SERVI PO BOX 320 WINSTON SALEM, NC 27102

WEST ASSET MANAGEMENT 2703 N HIGHWAY 75 SHERMAN, TX 75090

WEST GATE RESORT 4000 WESTGATE BLVD KISSIMMEE, FL 34747